

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

EXTENSION

NO.

DATE

15 April 1981

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. C/OPS/PTAS

15 APR 1981

C/OPS

The response on the questionnaire was coordinated through Health Officer.

2. DD/P+M
4E60 Hqs.

17 APR 1981

4/17 D

3. DD/Security
4E60 Hqs

20 APR 1981

4/20/81 Q

4. ~~D/O S~~5. ~~DDA~~
7D24 Hqs

20 APR 1981

21 APR 1981

mfr

6.

7. ~~DDA~~
7D24 Hqs

4-21

X

8.

9.

10.

11.

12.

13.

14.

15.

DD/A REGISTRY
FILE: ~~DDA~~

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Address Washington, D. C. 20505

Name	
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Address Central Intelligence Agency

Washington, D. C. 20505

1. Attendance only X
2. Request Display Area _____ Size _____
3. Offer Assistance in the area of:

Program _____
Logistics _____
Registration _____
Other (list) _____

Elva Slagle, 755-4390
Dan Green, OPM, 523-4550
Rudy Cobb, OPM, 653-6175
Carl Bishop, C of E, 272-0091
Patricia Castell, DOL, 376-2016

TAB